## LEGISLATIVE SERVICES AGENCY OFFICE OF FISCAL AND MANAGEMENT ANALYSIS

200 W. Washington, Suite 301 Indianapolis, IN 46204 (317) 233-0696 http://www.in.gov/legislative

## FISCAL IMPACT STATEMENT

**LS 6646 NOTE PREPARED:** Feb 20, 2003 **BILL NUMBER:** SB 122 **BILL AMENDED:** Feb 20, 2003

**SUBJECT:** Grievance Appeals.

FIRST AUTHOR: Sen. Gard

BILL STATUS: CR Adopted - 1<sup>st</sup> House

FIRST SPONSOR:

FUNDS AFFECTED: X GENERAL IMPACT: State & Local

 $\overline{\underline{X}}$  DEDICATED FEDERAL

<u>Summary of Legislation:</u> This bill provides that, unless an individual appealing a denial of reimbursement for covered health care services grants an extension of time for an accident and sickness insurer or a health maintenance organization to resolve the appeal, the appeal is automatically resolved in favor of the individual.

Effective Date: July 1, 2003.

Explanation of State Expenditures: (Revised) This bill may result in higher health insurance rates for state employees enrolled in health maintenance organizations. This increase is dependent upon two factors: (1) whether an HMO can resolve an appeal within the given 45-day time period, and (2) whether the insured grants an extension of time, beyond 45 days, to the insurer to resolve the appeal. If the answer to both of these is no, the appeal is automatically found in favor of the insured. Requiring insurers to make these expenditures may affect health insurance rates. The fiscal impact of this bill is undeterminable.

If insurance premiums increase, the state may choose to absorb any additional costs of these provisions or to pass these costs on to employees in the form of higher deductibles, higher premiums, or by limiting other conditions covered.

*Background Information:* For CY 2002 the state spent a total of \$279.6 M for employee health care. There are approximately 16,500 state employees currently enrolled in health maintenance organizations.

**Explanation of State Revenues:** (Revised) The bill makes a violation of the requirements for using credit information in underwriting property and casualty insurance policies an unfair and deceptive act and practice

SB 122+ 1

in the business of insurance. Violation of these requirements by an insurer may result in the levying of civil penalties. Civil penalties will be deposited in the state General Fund.

The civil penalties set forth for committing an unfair and deceptive act and practice in the business of insurance are \$25,000 for each act or violation, or \$50,000 for each act or violation if the person knew or reasonably should have known that they were in violation of this chapter. Total revenue is dependent upon number of occurrences.

**Explanation of Local Expenditures:** (Revised) This bill may result in higher health insurance rates for employees of local governments and school corporations enrolled in health maintenance organizations and group insurance plans. This increase is dependent upon two factors: (1) whether an HMO or group insurer can resolve an appeal within the given 45-day time period, and (2) whether the insured grants an extension of time, beyond 45 days, to the insurer to resolve the appeal. If the answer to both of these is no, the appeal is automatically found in favor of the insured. Requiring insurers to make these expenditures may affect health insurance rates. The fiscal impact of this bill is undeterminable.

It is unknown if local groups would absorb any additional costs resulting from this bill or pass the costs on to employees in the form of higher deductibles, higher premiums, or by limiting other conditions covered. Cost sharing of health benefit premiums varies widely by locality.

## **Explanation of Local Revenues:**

State Agencies Affected: All.

<u>Local Agencies Affected:</u> All local agencies that contract with health maintenance organizations or group insurance plans for employee health insurance.

## **Information Sources:**

Fiscal Analyst: Michael Molnar, 317-232-9559

SB 122+ 2